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To:

NAME:	FACSIMILE:	TELEPHONE:
MS AF U.S. Patent and Trademark Office	571-273-8300	571-272-0726

FROM: Debra J. Glaister  
Senior Patent Agent

DATE: November 17, 2005

Number of pages with cover page:	29
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Preparer of this slip has confirmed that facsimile number given is correct: 7230/PME2

Comments:

Official Filing

Examiner: S. Chen  
Art Unit: 1632  
U.S. Patent Application Serial No.: 09/457,931  
Filing Date: December 8, 1999  
Inventor: H. Ralph SNODGRASS  
Title: TOXICITY TYPING USING EMBRYOID BODIES  
Docket No.: 441472000100

Papers enclosed herewith:  
Transmittal - 1 page  
Fee Transmittal + duplicate copy for fee processing - 2 pages  
Supplemental Information Disclosure Statement - 3 pages  
Form PTO/SB/08a/b + copy - 2 pages  
Two (2) references - 20 pages

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/457,931	
	Filing Date	December 8, 1999	
	First Named Inventor	H. Ralph SNODGRASS	
	Art Unit	1632	
	Examiner Name	S. Chen	
Total Number of Pages in This Submission	28	Attorney Docket Number	441472000100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form + duplicate copy for fee processing - 2 pages  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental) - 3 pages  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below). Form PTO/SB/08a/b + copy - 2 pages Two (2) references - 20 pages Fax cover sheet
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Debra J. Glaister		
Date	November 17, 2005	Reg. No.	33,888

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Dated, November 17, 2005	Signature  (Patricia M. Ellison)

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PTO/SB/17 (12-04v2)

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<b>Effective on 12/09/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4810).</b> <b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/457,931
<b>TOTAL AMOUNT OF PAYMENT</b> (\$) 180.00		Filing Date	December 8, 1999
		First Named Inventor	H. R. SNODGRASS
		Examiner Name	S. Chen
		Art Unit	1632
		Attorney Docket No.	441472000100

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number <u>03-1952</u> Deposit Account Name: <u>Morrison &amp; Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

<b>2. EXCESS CLAIM FEES</b>		
<b>Fee Description</b>	<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

<b>Total Claims</b> 67 <b>Extra Claims</b> 0 <b>Fee (\$)</b> 50 <b>Fee Paid (\$)</b> 0.00	<b>Multiple Dependent Claims</b> <b>Fee (\$)</b> 360 <b>Fee Paid (\$)</b> 0.00
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<b>Indep. Claims</b> 3 <b>Extra Claims</b> 0 <b>Fee (\$)</b> 200 <b>Fee Paid (\$)</b> 0.00
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<b>3. APPLICATION SIZE FEE</b>			
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>
100	150	(round up to a whole number) x	

<b>4. OTHER FEE(S)</b>		<b>Fees Paid (\$)</b>
Non-English Specification: \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement		180.00

<b>SUBMITTED BY</b>			
Signature	<i>Debra J. Glaister</i>	Registration No. (Attorney/Agent)	33,888
Name (Print/Type)	Debra J. Glaister	Telephone	(650) 813-5725
		Date	November 17, 2005

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Dated: November 17, 2005

Signature:

*Patricia M. Ellison*

(Patricia M. Ellison)

PATENT

Docket No. 441472000100

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
H. Ralph SNODGRASS

Serial No.: 09/457,931

Filing Date: December 8, 1999

For: TOXICITY TYPING USING  
EMBRYOID BODIES

Examiner: S. Chen

Group Art Unit: 1632

SUPPLEMENTAL INFORMATION DISCLOSURE  
STATEMENT UNDER 37 C.F.R. § 1.97 & 1.98

MS AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicant submits for consideration in the above-identified application the document listed on the attached Form PTO/SB/08a/b. A copy of the document is also submitted herewith. The Examiner is requested to make this document of record.

The documents listed on the attached Form PTO/SB/08a/b were cited in an European Examination Report mailed on October 6, 2005, directed to a counterpart international or foreign application and have not been previously cited. A certification under 37 C.F.R. § 1.97(e)(1) follows:

I hereby certify that each item of information was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Supplemental Information Disclosure Statement.

pa-1023878

1

Application Serial No. 09/457,931

PATENT  
Docket No. 441472000100

This Supplemental Information Disclosure Statement is submitted:

- ☐ With the application; accordingly, no fee or separate requirements are required.
- ☐ Before the mailing of a first Office Action after the filing of a Request for Continued Examination under § 1.114. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
- ☐ Within three months of the application filing date or before mailing of a first Office Action on the merits; accordingly, no fee or separate requirements are required. However, if applicable, a certification under 37 C.F.R. § 1.97 (e)(1) has been provided.
- ☐ After receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance.
  - ☐ A fee is required. A check in the amount of \_\_\_ is enclosed.
  - ☐ A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.
  - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided above; accordingly, no fee is believed to be due.
- ☒ After mailing of a final Office Action or Notice of Allowance, but before payment of the issue fee.
  - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided above and a check in the amount of \_\_\_ is enclosed.
  - ☒ A Certification under 37 C.F.R. § 1.97(e) is provided above and a Fee Transmittal form (PTO/SB/17 is attached to this submission in duplicate.)

Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 and § 1.98 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist;

Application Serial No. 09/457,931

PATENT

Docket No. 441472000100

(iii) the information, protocols, results and the like reported by third parties are accurate or enabling;  
or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal form is separated from this document and the Patent and Trademark Office determines that an extension and/or other relief (such as payment of a fee under 37 C.F.R. § 1.17 (p)) is required, Applicant petitions for any required relief including extensions of time and authorize the Commissioner to charge the cost of such petition and/or other fees due in connection with the filing of this document to Deposit Account No. 03-1952 referencing 441472000100.

Dated: November 17, 2005

Respectfully submitted,

By   
Debra J. Glaister

Registration No.: 33,888  
MORRISON & FOERSTER LLP  
755 Page Mill Road  
Palo Alto, California 94304-1018  
(650) 813-5725

ALTERNATIVE TO PTO/SB08a/b (07-05)

Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>		<b>Complete if Known</b>			
		Application Number	09/457,931		
		Filing Date	December 8, 1999		
		First Named Inventor	H. R. SNODGRASS		
		Art Unit	1632		
		Examiner Name	S. Chen		
Sheet	1	of	1	Attorney Docket Number	441472000100

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document Country Code <sup>3</sup> -Number <sup>4</sup> Kind Code <sup>5</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>

\*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 801-04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard SI.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST-16 if possible. <sup>6</sup> Applicant is to place a check mark here if English language translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	T <sup>2</sup>
	1.	European Examination Report mailed on October 6, 2005 for EP Application No. 99963069.2 filed on December 9, 1999, 8 pages.	
	2.	Wobus, A.M. et al (1994). "In Vitro Differentiation of Embryonic Stem Cells into Cardiomyocytes or Skeletal Muscle Cells is Specifically Modulated by Retinoic Acid," <i>Roux's Arch. Dev. Biol.</i> 204(1):36-45.	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language translation is attached.

Examiner Signature		Date Considered	
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pa- 1023884

ALTERNATIVE TO PTO/CD/002a/b (07-05)

Substitute for form 1449/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (Use as many sheets as necessary)			Complete if Known	
			<div style="font-size: 48pt; font-weight: bold; text-align: center;">COPY</div>	
Application Number	09/457,931			
Filing Date	December 8, 1999			
First Named Inventor	H. R. SNODGRASS			
Art Unit	1632			
Examiner Name	S. Chen			
Attorney Docket Number	441472000100			
Sheet	1	of	1	

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number Number Kind Code <sup>2</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document Country Code <sup>2</sup> -Number <sup>3</sup> -Kind Code <sup>4</sup> (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>

\*EXAMINER, Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> See Kind Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>3</sup> Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>4</sup> For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>5</sup> Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 10 if possible. <sup>6</sup> Applicant is to place a check mark here if English language translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>6</sup>
	1.	European Examination Report mailed on October 6, 2005 for EP Application No. 99963069.2 filed on December 9, 1999. 8 pages.	
	2.	Wobus, A.M. et al.(1994). "In Vitro Differentiation of Embryonic Stem Cells into Cardiomyocytes or Skeletal Muscle Cells is Specifically Modulated by Retinoic Acid," <i>Roux's Arch. Dev. Biol.</i> 204(1):36-45.	

\*EXAMINER, Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4878).</b> <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number <b>09/457,931</b>	
		Filing Date <b>December 8, 1999</b>	
		First Named Inventor <b>H. R. SNODGRASS</b>	
		Examiner Name <b>S. Chen</b>	
		Art Unit <b>1632</b>	
TOTAL AMOUNT OF PAYMENT <b>(\$)</b> 180.00		Attorney Docket No. <b>441472000100</b>	

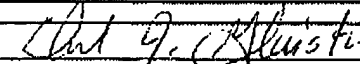
  

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify) _____	
<input checked="" type="checkbox"/> Deposit Account    Deposit Account Number <b>03-1952</b> Deposit Account Name: <b>Morrison &amp; Foerster LLP</b>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
<b>Fee Description</b>						<b>Fee (\$)</b>	<b>Small Entity Fee (\$)</b>
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		<u>Multiple Dependent Claims</u>		
67	0	50	0.00		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
					360	0.00	
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
3	0	200	0.00				
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
100		0					
<b>4. OTHER FEE(S)</b>							
Non-English Specification, \$130 fee (no small entity discount)						<u>Fees Paid (\$)</u>	
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement						180.00	

<b>SUBMITTED BY</b>			
Signature		Registration No (Attorney/Agent)	33,888
Name (Print/Type)	Debra J. Glaister	Telephone	(650) 813-5725
		Date	November 17, 2005

pa-1026440

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